

PART H
DIVISION V
COMMUNITY SUPPORT PROGRAM (CSP)

INTRODUCTION

The Wisconsin Medical Assistance Program (WMA) is governed by a complex set of regulations known as the Wisconsin Administrative Code, Rules of Health and Social Services, Chapters HSS 101-108 and by state and federal law. These regulations are interpreted for provider use in two parts of the WMA provider handbook. The two parts of the handbook are designed to be used in conjunction with each other and with the Wisconsin Administrative Code.

Part A of the WMA handbook includes general policy guidelines, regulations, and billing information applicable to all types of providers certified in the WMA. The service specific part of the handbook includes information on provider eligibility criteria, covered services, reimbursement methodology, and billing instructions. Each provider is sent a copy of the Part A and appropriate service specific part of the handbook at the time of certification.

Additional copies of provider handbooks may be purchased by writing to the address listed in Appendix 3 of Part A of the WMA Provider Handbook.

When requesting a handbook, be sure to indicate the type(s) of service provided (e.g., physician, chiropractic, dental). The document number of Part H of the handbook is POH-1050-H.

In addition to handbooks, providers are periodically issued bulletins regarding ongoing policy changes. Providers must maintain and cross reference the bulletins with the handbook as they are received to ensure access to the most current information.

It is important that both the provider of service and the provider's billing personnel read this material prior to initiating services to ensure a thorough understanding of WMA policy and billing procedures.

NOTE: For a complete source of WMA regulations and policies, the provider is referred to Wisconsin Administrative Code, Chapters HSS 101-108. In the event of any conflict in meaning between HSS 101-108 and the handbook, the meaning of the Wisconsin Administrative Code will hold. Providers may purchase HSS 101-108 from Document Sales at the address indicated above.

Providers should also be aware of other documents including state and federal laws and regulations, relating to the WMA:

- Chapter 49.43 - 49.497, Wisconsin Statutes
- Title XIX of the Social Security Act and its enabling regulations, Title 42 - Public Health, Parts 430-456.

A list of common terms and their abbreviations appear in Appendix 30 of Part A of the handbook and also in the Wisconsin Administrative Code, Chapter HSS 101.

**PART H, DIVISION V
COMMUNITY SUPPORT PROGRAM (CSP)
TRANSMITTAL LOG**

This log is designed as a convenient record sheet for recording receipt of handbook updates. Each update to Part H, Division V, of the handbook is numbered sequentially. This sequential numbering system alerts the provider to any updates not received. Providers must delete old pages and insert new pages as instructed. Use of this log helps eliminate errors and ensures an up-to-date handbook.

If a provider is missing a transmittal, please request it by transmittal number. For example, if the last transmittal number on your log is 5H-3 and you receive 5H-5, you are missing 5H-4. If a provider is missing a transmittal, copies of complete provider handbooks may be purchased by writing to the address listed in Appendix 3 of Part A of the WMAP Provider Handbook.

[illegible][illegible]

**COMMUNITY SUPPORT PROGRAM (CSP)
TABLE OF CONTENTS**

| | Page # |
|--|---------------|
| I. GENERAL INFORMATION | |
| A. Type of Handbook | 5H1-001 |
| B. Introduction | |
| Community Support Program Purpose | 5H1-001 |
| Community Support Program Definition | 5H1-001 |
| C. Provider Information | |
| Provider Eligibility and Certification | 5H1-001 |
| Mental Health Technician Training and Education Requirements | 5H1-002 |
| Application for Certification | 5H1-002 |
| Billing and Non-Billing Provider Numbers | 5H1-003 |
| Scope of Service | 5H1-003 |
| Reimbursement | |
| CSP Services | 5H1-003 |
| Clozapine Management | 5H1-003 |
| Provider Responsibilities | 5H1-004 |
| C. Recipient Information | |
| Eligibility for Medical Assistance | 5H1-004 |
| Medical Status | 5H1-004 |
| Recipients Eligible for CSP Services | 5H1-004 |
| Recipients Enrolled in WMAF-Contracted HMOs | 5H1-005 |
| Copayment | 5H1-005 |
| II. COVERED SERVICES AND RELATED LIMITATIONS | |
| A. Covered CSP Services | |
| CSP Assessments and Treatment Planning | 5H2-001 |
| CSP Transition to Community Living | 5H2-001 |
| CSP Routine Psychiatric Services | 5H2-002 |
| CSP Medication Prescription and Administration | 5H2-002 |
| CSP Symptom Management or Supportive Psychotherapy | 5H2-002 |
| CSP Case Management | 5H2-003 |
| CSP Employment Related Skill Training | 5H2-003 |
| CSP Psychosocial Rehabilitation | 5H2-004 |
| CSP Group Therapy | 5H2-004 |
| B. Place of Service | 5H2-005 |
| C. Non-CSP Mental Health and AODA Services | 5H2-005 |
| D. Contracting Services | 5H2-005 |
| E. Documentation | 5H2-006 |
| F. Noncovered CSP Services | 5H2-006 |

COMMUNITY SUPPORT PROGRAM (CSP)
TABLE OF CONTENTS
(continued)

| | Page # |
|---|---------------|
| II. COVERED SERVICES AND RELATED LIMITATIONS (continued) | |
| G. Clozapine Management Services | |
| Introduction | 5H2-006 |
| Conditions for Coverage of Clozapine Management | 5H2-007 |
| Components of Clozapine Management Services | 5H2-007 |
| Recordkeeping Requirements for Clozapine Management | 5H2-008 |
| H. Noncovered Clozapine Management Services | 5H2-009 |
| I. Clozapine Management Versus CSP Services | 5H2-009 |
| III. PRIOR AUTHORIZATION | |
| A. CSP Services | 5H3-001 |
| B. Clozapine Management Services | 5H3-001 |
| IV. BILLING INFORMATION | |
| A. Other Third Party Liability (TPL) Coverage | 5H4-001 |
| B. Medicare/Medical Assistance Dual Entitlement | 5H4-001 |
| C. Billed Amounts | 5H4-001 |
| D. Billing Increments | 5H4-001 |
| E. Clozapine Management | 5H4-002 |
| F. Claim Submission | |
| Paper Claim Submission | 5H4-002 |
| Paperless Claim Submission | 5H4-002 |
| Submission of Claims | 5H4-002 |
| G. Diagnosis Codes | 5H4-003 |
| H. Procedure Codes | 5H4-003 |
| I. Follow-up to Claim Submission | 5H4-003 |
| V. APPENDICES | 5H5-001 |

**SECTION V
COMMUNITY SUPPORT PROGRAM (CSP)
APPENDICES**

| | Page # |
|--|---------------|
| 1. National HCFA 1500 Claim Form Completion Instructions for Community Support Program (CSP) Services | 5H5-003 |
| 2. National HCFA 1500 Claim Form Samples | |
| a. The 51.42 Board is the CSP | 5H5-009 |
| b. The 51.42 Board Contracts with a Qualified CSP | 5H5-011 |
| 3. WMAF Allowable CSP Diagnosis Codes | 5H5-013 |
| 4. WMAF Allowable CSP Procedure Codes | 5H5-015 |
| 5. WMAF Allowable CSP Place of Service Codes | 5H5-017 |
| 6. Rounding Guidelines | 5H5-019 |
| 7. Staff Qualifications for CSP Billing Levels | 5H5-021 |
| 8. Instructions for the Completion of the Prior Authorization Request Form (PA/RF) | 5H5-023 |
| 9. Prior Authorization Request Form (PA/RF) Sample | 5H5-025 |
| 10. Instructions for the Completion of the Prior Authorization Clozapine Attachment (PA/CZA) | 5H5-027 |
| 11. Prior Authorization Clozapine Attachment (PA/CZA) Sample | 5H5-031 |